



020604

13281 U.S. PTO

## UTILITY PATENT APPLICATION TRANSMITTAL

☐ DUPLICATE

Address to:  
Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attorney Docket No.	GUNN3001/JEK/JJC
First Named Inventor (or identifier)	L. GUNNSTEINSSON
Total Pages	29

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10/772382

020604

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled: METHOD AND KIT FOR PREPARING A LAST FOR FOOTWEAR

- ☒ 1. Submitted herewith are the following:

18 pages of specification.

☒ Abstract.

2 sheet(s) of drawings.

21 claim(s).

☒ Oath/Declaration signed by each inventor.

☒ Application Data Sheet.

☐ Preliminary Amendment.

☒ Information Disclosure Statement(s).

1 pages of Form PTO-1449, and one copy of each document listed thereon.

☐ Assignment of the invention, Cover Sheet, and payment of the \$\_\_\_\_\_ recordal fee.

☐ certified copy of application no. \_\_\_\_\_ filed in \_\_\_\_\_. Priority is claimed.

☒ check in the amount of \$ 788.00 including any assignment recordal fee.

- ☒ 2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.

- ☒ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.

- ☐ 4. Insert before the first sentence of the specification: -- This application claims the benefit of provisional application number \_\_\_\_\_ filed \_\_\_\_\_. --

- ☐ 5. Insert before the first sentence of the specification: -- This application is a Continuation-in-part of nonprovisional application number \_\_\_\_\_ filed \_\_\_\_\_. --

- ☐ 6. Other: \_\_\_\_\_

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Eric S. Spector, Reg. No. 22,495; Felix J. D'Ambrosio, Reg. No. 25,721; Joseph DeBenedictis, Reg. No. 28,502; Benjamin E. Urcia, Reg. No. 33,805; and Justin J. Cassell, Reg. No. 46,205.

THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$770.00
Total Claims:	21	- 20 =	1	X \$18 =	\$18.00
Independent Claims:	2	- 3 =	0	X \$86 =	
Correspondence Address:  23364 Customer Number				Multiple Dependent Claim (add \$290.00):	
				Subtotal:	\$788.00
				50% Reduction if Small Entity Status:	
Phone: 703-683-0500 Fax: 703-683-1080				Total:	\$788.00
Date:	Name:		Signature :	Reg. No.	
February 6, 2004	JUSTIN J. CASSELL			46,205	